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STATE OF ARIZONA **POLITICAL COMMITTEE**

GEORETARY OF STATE

_	Out of other outside
X	Standing Political Committee

STATEMENT OF ORGANIZATION 18 AUG - 1 PM 2: 57

Out of State Committee										
Standing Political Committee Titles 16 & 19, Arizona Revised Statutes Definitions, statutory references and important information on page 2.							COMMITTEE ID NUMBER 201600655			
NAME OF POLITICAL COMMITTEE (For ballot mea	r) (DATE								
ARIZONA ROCK PRODUCTS ASSOCIATION ROCKPAC							08/01/2016			
TYPE OF COMMITTEE	***************************************		BALLOT MEASURE [□ SUPPORT □ OPPOSE				
INDEPENDENT EXPENDITURES (STANDING)										
COMMITTEE ADDRESS			CITY			STATE	ZIP			
916 W. ADAMS			PHOENIX			AZ	85007			
COMMITTEE MAILING ADDRESS (if different from	above)		CITY		,	STATE	ZIP			
916 W ADAMS ST			PHOENIX			AZ	85007			
COMMITTEE TELEPHONE #	COMMITTEE FAX #			COMMITTE	MITTEE EMAIL ADDRESS					
(602) 989-3854			STEVE@AZROCKPRODUCTS.ORG							
NAME OF SPONSORING ORGANIZATION (if appl	icable)		TYPE OF ORGANIZATION							
ARIZONA ROCK PRODUCTS ASSOCIATION			TRADE	SSOCIATIO	N					
ADDRESS OF SPONSORING ORGANIZATION			RELATIC	NSHIP TO F	POLITICA	L COMM	NITTEE			
916 W ADAMS ST PHOENIX AZ 85007			SPONSORING ORGANIZATION							
EACH POLITICAL COMMITTEE SHALL HAVE A CHAIRMAN AND TREASURER. THE POSITION OF CHAIRMAN AND TREASURER OF A SINGLE POLITICAL COMMITTEE MAY NOT BE HELD BY THE SAME INDIVIDUAL, EXCEPT THAT A CANDIDATE MAY BE CHAIRMAN AND TREASURER OF HIS OR HER OWN CAMPAIGN COMMITTEE. A.R.S. § 16-902(A).										
NAME OF COMMITTEE CHAIRMAN			CHAIRMAN'S TELEPHONE #		CHAIRMAN'S FAX#					
STEVE TRUSSELL		(602) 271-	0346							
CHAIRMAN'S ADDRESS		CITY			STATE ZIP		ZIP			
916 W ADAMS ST		PHOENIX			AZ.		85007			
CHAIRMAN'S OCCUPATION	CHAIRMAN'S EMPLOYER	₹	1	CHAIRMAN	N'S EMAII	L ADDRE	ESS			
EXECUTIVE DIRECTOR	AZ ROCK PRODUCTS AS	SOCIATION	l	STEVE@A	ZROCKP	RODUC	TS.ORG			
NAME OF COMMITTEE TREASURER BRAD PARKER		TREASURER'S TELEPHONE # (602) 768-9084		PHONE#	TREASURER'S FAX#					
TREASURER'S ADDRESS	CITY			STATE	•	ZIP				
2526 E UNIVERSITY DR		PHOENIX			AZ		85034			
TREASURER'S OCCUPATION TREASURER'S EMPLOY		ER TREASUR		ER'S EMAIL ADDRESS						
MANAGER VULCAN MATERIALS			PARKERBRAI			AD@VMCMAIL.COM				
LIST THE NAMES OF ALL FINANCIAL INSTITUTIONS WITH WHICH THE COMMITTEE MAINTA INS ACCOUNTS OR SAFETY DEPOSIT BOXES. (Do not list account numbers.)										
1.		3.								
1. CHASE 2.										
FOR A CANDIDATE'S CAMPAIGN COMMITTEE OR AN EXPLORATORY COMMITTEE, PROVIDE THE FOLLOWING INFORMATION: (For Exploratory Committees p arty affiliation and office sought are optional.)										
NAME OF CANDIDATE OR DESIGNATING INDIVIDUAL ("DI") ELECTION CYCLE							····			
CANDIDATE OR D/I'S TELEPHONE # CANDIDATE OR D/I'S FAX #				COUNTY OF RESIDENCE						
CANDIDATE OR D/I'S ADDRESS	CITY			STATE		ZIP				
CANDIDATE OR D/I'S EMAIL ADDRESS PARTY AFFILIATION				OFFICE SC	L DUGHT		<u> </u>			

Committee ID: 201600655

Date:

08/01/2016

Form ID:

0000391569



YOUR APPLICATION IS NOT COMPLETE WITHOUT THE REQUIRED SIGNATURES BELOW:

BOX 1	All committe	es require the signature of t	ooth the chairman and	d treasurer. Standing Com	mittees, see BOX 3 below.	
campaig	gn finance and reportir	ER'S STATEMENT: We, to and have examined the e, correct and complete.	he undersigned cha information contair	irman and treasurer, have ned in this statement of or	read all of the applicable law ganization and, to the bes	vs relat ing to t of our
Date:	811116	Chairman's signa	ature:			
Date:		Treasurer's signa	ature:			
			F. W			
BOX 2					nittee or exploratory committee.	
		R CANDIDATE'S STATEN ce expenditures on my be		e above -named political	committee as my political co	ommittee to
Date:		D/l's or Candidat	e's signature:			
İ						
BOX 3	Complete and notariz	e this box only if the comm	ittee has been in exist	tence for more than one yea	ar and is filing for Standing Com	nmittee status.
	NG POLITICAL COMN tee as a standing polit		applicable) (A.R.S. §	16 -902.01): I/we hereby o	leclare the status of this polit	tical
Date: 2	3/1/16	Chairman's signature:	Stu	Trusuell		
Date:		Freasurer's signature:				
State of	Arizona	}		State of Arizona	}	
County	of Maricopa) ss.)		County of		
SUBSC	RIBĘP AND SWORN T	O before me this	day of Aug 20	L'SUBSCRIBED AND SW	ORN TO before me this	
Notary I	Public	My Commission Expires:	05/05/20/00	Notary Public	My Commission Expire)S:

